PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450 or Fax (571)-273-2885



INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	a ociow or directed of	for training the herwise	nsmitting the ISS Patent, advance of e in Block I, by (UE FEE and PUBLICA orders and notification of a) specifying a new corr	TION FEE (if requirements fees espondence address	uired). will be s; and/o	Blocks I through 5 mailed to the curren or (b) indicating a se	should be completed when it correspondence address a parate "FEE ADDRESS" fo
CURRENT CORRESPONDE	r any change of address)	e(s) I ransmittal, I h	us certi	ficate cannot be used	for domestic mailings of the for any other accompanying cent or formal drawing, mus			
7055 7590 06/26/2007							_	
GREENBLUM & BERNSTEIN, P.L.C. 1950 ROLAND CLARKE PLACE RESTON, VA 20191					Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
								(Depositor's name)
								(Signature)
				L				(Date)
APPLICATION NO. FILING DATE				FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/774,540 02/10/2004				Shinsuke Okada	P24587			1084
TITLE OF INVENTION:								
				· ·				•
APPLN. TYPE	SMALL ENTITY	ıs	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1400	\$300	\$0		\$1700	09/26/2007
EXAMINER A			ART UNIT	CLASS-SUBCLASS]			
KASZTEJNA, MATTHEW JOHN 3739				600-176000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a sing registered attorney or	single firm (having as a member a y or agent) and the names of up to t attorneys or agents. If no name is			
3. ASSIGNEE NAME AN	D RESIDENCE DATA	тов	E PRINTED ON T	THE PATENT (print or ty	pc)			
PLEASE NOTE: Unleaded recordation as set forth	ss an assigned is identi in 37 CFR 3.11. Comp	fied be	clow, no assignee of this form is NO	data will appear on the pr a substitute for filing an	atent. If an assign	cc is id	lentified below, the d	locument has been filed for
(A) NAME OF ASSIGNEE PENTAX Corporation				(B) RESIDENCE: (CITY and STATE OR COUNTRY) Tokyo, JAPAN				
Optiscan Pty Ltd. Victoria, Australia								
Please check the appropria	te assignee category or	catego	rics (will not be pr	inted on the patent):	Individual 🖾 Co	rporati	on or other private gre	oup entity Government
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.								
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # 6	of Copies			The Director is hereby overpayment, to Depo	y authorized to char	ge the r	equired fee(s), any de	ficiency, or credit any n extra copy of this form).
5. Change in Entity Statu	•		•	_			***************************************	
	Publication Fee (if requ	ired) w	rill not be accented	b. Applicant is no lon				FR 1.27(g)(2). ne assignce or other party in
Authorized Signature	In Share you	lov		Joshua M. Povsnei	Date 8	.) (2007	
Typed or printed name Bruce H. Bernstein				Reg. #42,086	Registration N			
This collection of informat an application. Confidentia submitting the completed a this form and/or suggestion	ion is required by 37 Clairly is governed by 35 application form to the is for reducing this bur	FR 1.31 U.S.C. USPT(dcn, sh	11. The informatio 122 and 37 CFR I D. Time will vary ould be sent to the	n is required to obtain or 1.14. This collection is est depending upon the indiv Chief Information Office	_			by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce. P.O.

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.